BIRCH, STEWART, KOLASCH & BIRCH, LLP

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COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT AND DESIGN APPLICATIONS

As a below named inventor, I hereby declare that: my residence, post office address and citizenship are as stated next to my name; that I verily believe that I am the original, first and sole inventor (if only one inventor is named below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

	below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:				
Insert Title:	BIOACTIVE COATING OF BIOMEDICAL IMPLANTS				
	the specification of which is attached hereto. If not attached hereto, the application is identified by the attorney docket number as set forth above and/or the following:				
Fill in Appropriate				plication Number	10/586,261 ;
Information -	and amended on 07/	18/2006 (if ap	oplicable) and/or		
For Use Without Specification	the specification was filed or		_as PCT International A	pplication Number <u>PC1</u>	'/AU2005/000055;
Attached:			(if applicable) lerstand the contents of the o above, tion which is material to		
	claims, as amended by any amendment referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, \$1.56. I hereby claim foreign priority benefits under Title 35, United States Code, \$119(a)-(d) of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:				
	Prior Foreign Application	n(s)			Priority Claimed
Insert Priority	2004900202	Aust	ralia	January 19, 2004	Yes No
Information (if appropriate)	(Number)	(Country)		nth/Day/Year Filed)	
	(Number)	(Country)	ı i	nth/Day/Year Filed)	Yes No
	(Number)	(Country)	(Mos	nth/Day/Year Filed)	Yes No
·	(Number) I hereby claim the benefit we listed below.	(Country) nder Title 35, United	(Monda States Code, §119(e) of	nth/Day/Year Filed) any United Slates provis	Yes No sional applications(s)
Insert Provisional					
Application(s): (if any)	(Application Number)		(Filing Date)		
	(Application Number)		(Filing Date)		
•	All Foreign Applications, if Designs) Prior to the Filing D	ate of This Applicant	on:		
Insert Requested Information (if appropriate)	insert Requested Country Application Number Date of Fili Information			Date of Filing (f	Month/Day/Year)
	I hereby claim the benefit used including for continuation-in this application is not discloss paragraph of Title 35, United patentability as defined in Title of the prior application and the prior ap	a-part application(s) sed in the prior Unit States Code, \$112, tle 37. Code of Feder	listed below and, insolar ted States and/or PCT ap I acknowledge the duty to al Regulations, \$1.56 which	as the subject matter or plication in the manner o disclose information wh h become available beb	each of the claims of provided by the first nich is material to the
Insert Prior U.S. Application(s):	(Application Number)		ling Date)	(Status - patented, pe	nding, abandoned)
(if any)	(Application Number)	(Fil	ling Date)	(Status - patented, pe	nding, abandoned)
	•				

I hereby appoint the practitioners at CUSTOMER NO. 02292 as my attorneys or agents to prosecute this application and/or an international application based on this application and to transact all business in the United States Patent and Trademark Office connected therewith and in connection with the resulting patent based on instructions received from the entity who first sent the application papers to the practitioners, unless the inventor(s) or assignee provides said practitioners with a written notice to the contrary:

Send Correspondence to:

CUSTOMER NO. 02292; (BIRCH, STEWART, KOLASCH & BIRCH, LLP) Telephone: (703) 205-8000 • Facsimile: (703) 205-8050

PLEASE NOTE: YOU MUST COMPLETE THE FOLLOWING:

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full Name of First or Sole Inventors Insert Name of	GIVEN NAME/FAMILY NAME Sunil KUMAR	INVENTOR'S SIGNATURE	DATE*			
Inventor -> Insert Date This Document is Signed		<u> </u>	25/08/08			
Insert Residence	Residence (City, State & Country) GREENWITH, SOUTH ANS TRE	CITIZENSHIP Australia				
Insert Citizenshiv → Insert Post Office	MAILING ADDRESS (Complete Street Address including City, State & Country)					
Address	11 BERESINA PLACE, GREE	NWITH, SA 5125, A	USTRALIA .			
Full Name of Second Inventor, if any: see above	GIVEN NAME/FAMILY NAME Hailong ZHANG	INVENTOR'S SIGNATURE	DATE*			
	Residence (City. State & Country)		CITIZENSHIP People's Republic of China			
_	MAILING ADDRESS (Complete Street Address including City, State & Country)					
Full Name of Third Inventor, if anys see above	GIVEN NAME/FAMILY NAME Darren John SIMPSON	INVENTOR'S SIGNATURE	DATE*			
•	Residence (City, State & Country)	CITIZENSHIP Australia				
	MAILING ADDRESS (Complete Street Address	including City, State & Country)	^			
Full Name of Fourth Inventor, if any; see above	GIVEN NAME/FAMILY NAME Roger St. Clair SMART	INVENTOR'S SIGNATURE	DATE*			
	Residence (City, State & Country) Tennyson, Australia	CITIZENSHIP Australia				
	MAILING ADDRESS (Complete Street Address including City, State & Country) 2/6 Bournemouth Street; Tennyson South Australia 5022; AUSTRALIA					
Full Name of Fifth Inventor, if anys see above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*			
	Residence (City, State & Country)	CITIZENSHIP				
	MAILING ADDRESS (Complete Street Address including City, State & Country)					
Full Name of Sixth Inventor, if any; see above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*			
	Residence (City, State & Country)	CITIZENSHIP				
	MAILING ADDRESS (Complete Street Address including City, State & Country)					

*DATE OF SIGNATURE

(Rev. 02/2008) Birch, Stewart, Kolasch & Birch, LLP

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P.O. Box 747 • Falls Church, Virginia 22040-0747
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COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT AND DESIGN APPLICATIONS

As a below named inventor, I hereby declare that: my residence, post office address and citizenship are as stated next to my name; that I verily believe that I am the original first and sole inventor if only one inventor is named.

	below) or an original, fix claimed and for which a	st and joint invento	or (if plural invento	ors are named b	elow) of the sub	ject matter	which is
nsert Title:	BIOACTIVE COATING	OF BIOMEDICAL I	MPLANTS				
	the specification of which docket number as set for	h is attached heret h above and/or the	o. If not attached lefollowing:	hereto, the appli	cation is identi	fied by the	attorney
ill in Appropriate nformation =	The specification was file				n Number	10/586,26	1;
	and amended on0	7/18/2006 (ii	fapplicable) and/c	or or			
or Use Without Specification	the specification was filed	on 01/19/2005	as PCT Interna	ational Application	on Number <u>PC</u>	r/AU2005/)00055;
Attached:	and was amended on I hereby state that I have reviewed and understand the contents of the above-identified specification, included claims, as amended by any amendment referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, 15 Federal Regulations, \$1.56. I hereby claim foreign priority benefits under Title 35, United States Code, \$119(a)-(d) of any foreign application for patent or inventor's certificate listed below and have also identified below any foreign application for paintentor's certificate having a filing date before that of the application on which priority is claimed:					Code of ication(s) oatent or	
	Prior Foreign Applicat	ion(s)	•			Priority Cl	aimed
nsert Priority	2004900202		stralia		ry 19, 2004	(<u>×</u>	
nformation if appropriate)	(Number)	(Country)			//Year Filed)	Yes	No
	(Number)	(Country)		(Month/Day	y/Year Filed)	Yes	No
	(Number)	(Country)		(Month/Day	y/Year Filed)	Yes	No
nsert Provisional		(Country) under Title 35, Un		119(e) of any Uni	y/Year Filed) ted States provi	Yes sional applic	No rations(s)
application(s): if any)	(Application Number)		(Fili	ing Date)		•	
	(Application Number) All Foreign Applications,	if any few any Pat	*	ing Date) Pertificate Filed N	Nore then 12 M	onths (6 Mc	onths for
	Designs) Prior to the Filing	Date of This Applic	ation:		2014 (2	(, , ,	
nsert Requested nformation f appropriate)			Application Nu	mber -	Date of Filing (I	Month/Day	/Year)
	I hereby claim the benefi including for continuation this application is not dis- paragraph of Title 35, Uni- patentability as defined in of the prior application and	-in-part application(closed in the prior U ted States Code, §11 Title 37, Code of Fed	(s) listed below and Inited States and/or 12, I acknowledge th deral Regulations, \$1	, insofar as the si r PCT application ie duty to disclose L56 which becam	ibject matter of i in the manner information whe ie available bet	each of the provided by nich is mater	the first
nsert Prior U.S. Application(s): if any)	(Application Number)	(Filing Date)	(Statu	s - patented, pe	nding, aban	doned)
,	(Application Number)		Filing Date)	(Statu	s – patented, pe	nding, aban	doned)

Attorney Docket No. 0641-0283PUS1

I hereby appoint the practitioners at CUSTOMER NO. 02292 as my attorneys or agents to prosecute this application and/or an international application based on this application and to transact all business in the United States Patent and Trademark Office connected therewith and in connection with the resulting patent based on instructions received from the entity who first sent the application papers to the practitioners, unless the inventor(s) or assignee provides said practitioners with a written notice to the contrary:

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+					
Pull Name of First or Sole Inventors Insert Name of Inventor>	GIVEN NAME/FAMILY NAME Sunil KUMAR	INVENTOR'S SIGNATURE	ľ	DATE*	
Insert Date This Document is Signed	Residence (City, State & Country)	L	CITIZENSHIP		
Insert Residence	Golden Grove, Australia			ustralia	
Insert Citizenship -> Insert Post Office	MAILING ADDRESS (Complete Street Address	including City, State & Country)			
Address →	29 Rotz Court; Golden Grove South Australia 5	125; AUSTRALIA			
Pull Name of Second	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*	
Inventor, if anys	Hailong ZHANG	Hailory Zhan		26/08/2008	
	Residence (City, State & Country)	0	CITIZENSI	IIP Australia epublic of China	
	Wheelers Hill, Victoria, Australia MAILING ADDRESS (Complete Street Address	including City, State & Country)			
	4 Allendale Crescent, Wheelers H	ill, Vic, 3150, Austr	alia		
Full Name of Third Inventur, if anyi see above	GIVEN NAME/FAMILY NAME Darren John SIMPSON	INVENTOR'S SIGNATURE		DATE*	
•	Residence (City, State & Country)			CITIZENSHIP Australia	
	MAILING ADDRESS (Complete Street Address including City, State & Country)				
Full Name of Fourth Inventor, if anys see above	GIVEN NAME/FAMILY NAME Roger St. Clair SMART	INVENTOR'S SIGNATURE		DATE*	
-	Residence (City, State & Country) Tennyson, Australia			CITIZENSHIP Australia	
Full Name of Fifth Inventor, if any: see above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*	
	Residence (City, State & Country)		CITIZENSI	ПР	
	MAILING ADDRESS (Complete Street Address including City, State & Country)				
Full Name of Sixth Investor, if any: see above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*	
	Residence (City, State & Country)		CITIZENSI	IIP	
	MAILING ADDRESS (Complete Street Address including City, State & Country)				

*DATE OF SIGNATURE

HZ.

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	below) or an original, firs claimed and for which a p	t and joint invent atent is sought on	or (if plural invent the invention enti	ors are named below) or t tled:	ne subject mate	EL WINCH 10	
insert Title:	BIOACTIVE COATING OF BIOMEDICAL IMPLANTS						
	the specification of which docket number as set forth	is attached heret above and/or the	e following:			ie attorney	
ill in Appropriate	The specification was filed			States Application Number	er 10/586,	,261;	
monnauon -	and amended on 07	/18/2006 (i	f applicable) and/	Or			
For Use Without Specification	the specification was filed	on <u>01/19/200</u>	5 as PCT Intern	ational Application Numb	er PCT/AU200	<u>5/000055</u> ;	
Attached:	1 11	d t C	A La Abarra	ents of the above-identified			
	claims, as amended by any I acknowledge the du	ty to disclose info	rmation which is n	naterial to patentability as	defined in Title :	37, Code of	
	Federal Regulations, \$1.56. I hereby claim foreign	I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56. I hereby claim foreign priority benefits under Title 35, United States Code, §119(a)-(d) of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:					
	Prior Foreign Applicati	on(s)			Priority	Claimed	
Insert Priority	2004900202		ustralia	January 19, 20			
(nformation (if appropriate)	(Number)	(Country)		(Month/Day/Year F		No .	
	(Number)	(Country)		(Month/Day/Year F	💭	No	
	(Number)	(Country)		(Month/Day/Year F		No	
	(Number) I hereby claim the benefit listed below.	(Country) under Title 35, Un	nited States Code, §	(Month/Day/Year F 1119(e) of any United State		No plications(s)	
insert Provisional							
Application(s): (if any)	(Application Number)			ling Date)			
	(Application Number) (Filing Date)						
	All Foreign Applications, Designs) Prior to the Filing	if any, for any Pa Date of This Applic	cation:				
Insert Requested Information (if appropriate)	Country		Application Nu	ımber Date of I	Filing (Month/E	/ay/Year)	
	I hereby claim the benefit including for continuation- this application is not disc paragraph of Title 35, Unit patentability as defined in of the prior application and	in-part application losed in the prior I ed States Code, \$1 Title 37. Code of Fe	(s) listed below and United States and/o 12, I acknowledge t deral Regulations, §	d, insolar as the subject maps or PCT application in the x he duty to disclose informa §1.56 which became availa	atter or each or t nanner provided ation which is ma	the clause of by the first aterial to the	
Insert Prior U.S. Application(s): (if any)	(Application Number)		(Filing Date)	(Status - pater	nted, pending, al	bandoned)	
(11 cmily)	(Application Number)		(Filing Date)	(Status – pater	nted, pending, al	bandoned)	

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↓	application of any parent abuce arcicose				
full Name of First or Sole Inventor nseri Name of Inventor nsert Date This	GIVEN NAME/FAMILY NAME Sunil KUMAR	INVENTOR'S SIGNATURE	DATE*		
Document is Signed nsert Residence psert Citizenship →	Residence (City, State & Country) Golden Grove, Australia		CITIZENSHIP Australia		
nsert Post Office Address →	MAILING ADDRESS (Complete Street Address 29 Rotz Court, Golden Grove South Australia S	including City, State & Country) 5125; AUSTRALIA			
uii Name of Second Inventor, if any: see above	GIVEN NAME/FAMILY NAME Hailong ZHANG	INVENTOR'S SIGNATURE	DATE*		
	Residence (Citv. State & Country)		CITIZENSHIP People's Republic of China		
	MAILING ADDRESS (Complete Street Address	including City, State & Country)	•		
uli Name of Third Inventor, if any: see above	GIVEN NAME/FAMILY NAME Darren John SIMPSON	INVENTOR'S SIGNATURE	DATE* 25/08/2008		
DS.	Residence (City, State & Country) 'St Agnes, SA 5097 Australia	CITIZENSHIP Australia			
	MAILING ADDRESS (Complete Street Address I & Wild Oak Grove, St Agnes	including City, State & Country) SA 5047 AUSTRALIA			
uil Name of Fourth Inventor, if any; see above	GIVEN NAME/FAMILY NAME Roger St. Clair SMART	INVENTOR'S SIGNATURE	DATE* 25/08/2008		
2 P	Residence (City, State & Country) Tennyson, Australia S. a & Aus Wole.		CITIZENSHIP / Australia		
(SE)	MAILING ADDRESS (Complete Street Address 2/6 Bournemouth Street; Tennyson South Aust				
uli Name of Fifth Inventor, if any: see above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*		
	Residence (City, State & Country)		CITIZENSHIP		
	MAILING ADDRESS (Complete Street Address	including City, State & Country)			
uli Name of Sixth Inventor, if any: see above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE*		
	Residence (City, State & Country)	CITIZENSHIP			
	MAILING ADDRESS (Complete Street Address including City, State & Country)				

^{*}DATE OF SIGNATURE